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Under Secretary of Compactor for Intellectual Property and Director of the United States Patent and Trademark Office

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Paper No: 25

| Appeal No: | 2004-2266 Ingram, Gerald W., et al. | |
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| Appellant: | | |
| Application No: | 09/847,999 | |
| Hearing Room: | A | |
| Hearing Docket: | В | |
| Hearing Date: | Thursday, March 10, 2005 | |
| Hearing Time: | 9:00 AM | |
| Location: | MADISON BUILDING (EAST WING) | |
| | 600 Duleny Street | |

Alexandria, Virginia 22313-1450

NOTICE OF HEARING CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Your attention is directed to 37 CFR § 41.47.

The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up.

The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED.

This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

Failure to file this form within this time period will be construed as a waiver of the request for oral hearing.

37 CFR § 1.136(a) does not apply. By order of the Board of Patent Appeals and Interferences

counsel:

| BPAI HEARINGS FAX No: (571) 273-0299 USPTO Central Fax No. (703) 872-9306 Clerk of the Board (571) 272-9797 In all communications relating to the | BOARD OF PAT UNITED PATEN P.O. BOX 1450 ALEXANDRIA, \ | BPAI Mailing Address: BOARD OF PATENT APPEALS AND INTERFERENCES UNITED PATENT AND TRADEMARK OFFICE P.O. BOX 1450 ALEXANDRIA, VIRGINIA 22313-1450 Deal, please identify the appeal by its number. | |
|---|--|--|--|
| CHECK ONE: | HEARING ATTENDAM | NCE CONFIRMED | |
| Signature of Attorney/Agent/Appel Names of other visitors expected to accom | | Registration No. | |